COMBINED DECLARATION FOR PATENT International Applications)	CLARATION FOR PATENT APPLICATION AND POWER OF ATTOI plications)						Attorney D J6896(C)	Attorney Docket No. J6896(C)	
As a below named inventor, I hereby declar	e that:								
My residence, post office address and citize	enship are as sta	ted below ne	ext to my nan	ne.					
I believe I am the original, first and sole invectaimed and for which a patent is sought on	entor (if only one the invention en	name is liste titled:	ed below) or	an orig	ginal, first and joint	t inventor (if plural name:	s are listed b	elow) of the s	subject matter which is
RINSE-OFF FACIA SUBMICRON									
the specification of which (check only one it	em below):								
☑ is attached hereto.									
was filed as United States application S						•	if applicable)		
was filed as PCT international application	ionor	1	and	was a	mended under PC	CT Article 19 on(if applicable)		
I hereby state that I have reviewed and und	erstand the cont	ents of the a	bove-identifi	ed sp	ecification, includir	ng the claims, as amend	ed by any am	nendment ref	ferred to above.
I acknowledge the duty to disclose informat	ion which is mate	erial to the p	atentability o	of this	application in acc	ordance with Title 37, Co	de of Federa	al Regulation	s, § 1.56(a).
I hereby claim foreign priority benefits unde application(s) designating at least one coun certificate or any PCT international applicati before that of the application(s) of which pri	r Title 35, United stry other than the ion(s) designating	States Code United Sta	e, §119 of ar tes of Americ	ny fore na liste	eign application(s) d below and have	for patent or inventor's o	ertificate or o	of any PCT in	itemational r patent or inventor's
PRIOR FOREIGN/PCT APPLICATION(S)	AND ANY PRIO	RITY CLAIN	S UNDER 3	5 U.S.	C. 119:				
COUNTRY (if PCT, indicate "PCT") APPLICATION NUMBER			DATE OF FILING (day, month, year)			PRIORITY CLAIMED UNDER 35 U.S.C. 119			
hereby claim the benefit under Title 35, Unit	ed States Code §	3119(e) of a	ny of any Un	ited S	tates provisional a	application(s) listed below	N:		
PRIOR U.S. PROVISIONAL APPLICATION	N(S) FOR BENE	FIT UNDER	35 U.S.C. 1	19(e)					
APPLICATION NUMBER				DATE OF FILING (day, month, year)					
hereby claim the benefit under Title 35, University of Title 35, University of Title 35, United States Code §1 etween the filing date of the prior application RIOR U.S. APPLICATIONS OR PCT INTER	matter of each o 12. I acknowledo (s) and the natio	f the claims ge the duty t nal or PCT i	of this applicate disclose mainternational	ation is aterial filing d	s not disclosed in the information as de ate of this application	that/those prior application fined in Title 37, Code of tion.	on(s) in the m Federal Rec	nanner provid	led by the first
U.S. APPLICATIONS				STATUS (CHECK ONE)					
U.S. APPLICATION NUMBER U.S. FILING		NG DATE			PATENTED	PENDING)	ABANDONED	
DOT ADDI IOATIONO DEGISTRA									
PCT APPLICATIONS DESIGNATING THE	U.S.					ı		,	
1		U.S SERIA ASSIGNE							
			`						

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT	Attorney Docket No.
International Applications)	J6896(C)
	30030(0)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

201

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	TSAUR	LIANG	SHENG
RESIDENCE AND CITIZENSHIP	CITY NORWOOD	STATE OR FOREIGN COUNTRY NEW JERSEY	COUNTRY OF CITIZENSHIP UNITED STATES
POST OFFICE	POST OFFICE ADDRESS 12 GARNETT PLACE	CITY	STATE & ZIP CODE/COUNTRY
ADDRESS		NORWOOD	NEW JERSEY 07468

202

FULL NAME OF INVENTOR	FAMILY NAME POLONKA	FIRST GIVEN NAME JACK	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY PEEKSKILL	STATE OR FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP UNITED STATES
POST OFFICE ADDRESS	POST OFFICE ADDRESS 1419 LONGVIEW AVENUE	CITY PEEKSKILL	STATE & ZIP CODE/COUNTRY NEW YORK 10566

203

FULL NAME OF INVENTOR	FAMILY NAME CHANDAR	FIRST GIVEN NAME PREM	SECOND GIVEN NAME		
RESIDENCE & CITIZENSHIP	CITY CLOSTER	STATE OR FOREIGN COUNTRY NEW JERSEY	COUNTRY OF CITIZENSHIP MALAYSIA		
POST OFFICE ADDRESS	POST OFFICE ADDRESS 24 SMITH COURT	CITY CLOSTER	STATE & ZIP CODE/COUNTRY NEW JERSEY 07624		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR	201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 20	03
DATE		DATE	DATE	